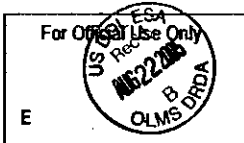


# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved  
Office of Management  
and Budget  
No. 1215-0188  
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>6972</u>	2. Fiscal Year Covered From: <u>1 / 1 / 2004</u> Through: <u>12 / 31 / 2004</u>
3. Name and address of person filing. Name <u>DENNIS M BARKER</u>  P.O. Box, Bldg., Room No., if any  Street <u>247 GRACE CT,</u> City <u>CROWN POINT</u> State <u>INDIANA</u> ZIP Code + 4 <u>46307</u>	4. Name, file number, and address of labor organization. Name <u>NW INDIANA PAINTERS LOCAL 400</u> Labor Organization File Number <u>004/03</u>  P.O. Box, Building and Room Number, if any  Street <u>8364 MINNESOTA ST,</u> City <u>MERRILLVILLE</u> State <u>INDIANA</u> ZIP Code + 4 <u>46410</u>
5. Position in labor organization. <u>FINANCIAL SECRETARY</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income.          7.b. Amount.          <u>0</u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>Dennis M Barker</u>	On <u>8/15/05</u>	<u>219 662-2332</u>
	Date	Telephone Number

Name of Person Filing <b>DENNIS M. BARKER</b>	File Number U-
---	----------------

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <b>IUPAT - JATF</b></p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>1750 NEW YORK AVE. N.W.</b></p> <p>City <b>WASHINGTON</b></p> <p>State <b>D.C.</b> ZIP Code + 4 <b>20006</b></p>	<p>9. Business deals with:</p> <p style="margin-left: 40px;">a. Labor Organization</p> <p style="margin-left: 40px;"><input checked="" type="checkbox"/> b. Trust</p> <p style="margin-left: 40px;">c. Employer</p>								
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <b>SAME</b></p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>11.a. Nature of such dealing.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px 10px;">LODGING &amp; MEALS</td> <td style="text-align: right; padding: 2px 10px;">832.00</td> </tr> <tr> <td style="padding: 2px 10px;">GRADUATION BANQUET</td> <td style="text-align: right; padding: 2px 10px;">43.00</td> </tr> <tr> <td style="padding: 2px 10px;">AIRFARE</td> <td style="text-align: right; padding: 2px 10px;">309.00</td> </tr> <tr> <td colspan="2" style="padding: 2px 10px;">TRAIN THE TRAINER CLASSES</td> </tr> </table> <p>11.b. Approximate dollar value of such dealing. <b>\$1184.00</b></p> <p>12.a. Nature of interest held or income received.</p> <p style="height: 100px; border: 1px solid black;"></p> <p>12.b. Amount. <b>0</b></p>	LODGING & MEALS	832.00	GRADUATION BANQUET	43.00	AIRFARE	309.00	TRAIN THE TRAINER CLASSES	
LODGING & MEALS	832.00								
GRADUATION BANQUET	43.00								
AIRFARE	309.00								
TRAIN THE TRAINER CLASSES									

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>14.a. Nature of payment.</p> <p style="height: 100px; border: 1px solid black;"></p>
<p>13.b. Is the Business an Employer      c - Consultant      ?</p>	<p>14.b. Amount of payment.</p>

Name of Person Filing <b>DENNIS M. BARKER</b>		File Number U-
---	--	----------------

B. Held an interest in or derived income or economic benefit with monetary value from a business (\*) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <b>NW INDIANA PAINTERS JATC</b></p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>8364 MINNESOTA ST.</b></p> <p>City <b>MERRILLVILLE</b></p> <p>State <b>INDIANA</b> ZIP Code + 4 <b>46410</b></p>	<p>9. Business deals with:</p> <p style="padding-left: 20px;">a. Labor Organization</p> <p style="padding-left: 20px;"><input checked="" type="checkbox"/> b. Trust</p> <p style="padding-left: 20px;">c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <b>SAME</b></p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>11.a. Nature of such dealing.</p> <p style="padding-left: 20px;"><b>STATE APPRENTICESHIP CONFERENCE</b> <b>LODGING &amp; MEALS</b> <b>BANQUET</b></p> <hr/> <p>11.b. Approximate dollar value of such dealing. <b>\$500.00</b></p> <hr/> <p>12.a. Nature of interest held or income received.</p>  <hr/> <p>12.b. Amount. <b>0</b></p>

**C. Received from any employer** (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>14.a. Nature of payment.</p>     
<p>13.b. Is the Business an Employer or Consultant ?</p>	<p>14.b. Amount of payment. <b>0</b></p>

Dennis M. Barker , Financial Secretary

August 15, 2005

US Department of Labor  
Employment Standards Administration  
Office of Labor-Management Standards  
200 Constitution Ave. NW Room N-5616  
Washington, DC 20210

RE: Amended Form LM-30 (1/1/04-12/31/04)

To Whom it May Concern

Attached is an amended LM-30 form for Dennis M. Barker. After mailing the original LM-30 I received additional information that should have been included with it. I am a first time filer and was not aware of this additional information till after mailing the first LM-30. Please include this additional information with my original LM-30 information.

Sincerely



Dennis M. Barker  
Financial Secretary  
NW Indiana Painters Local 460